

	<b>UNITED STATES PATENT AND TRADEMARK OFFICE</b>	<b>UNITED STATES DEPARTMENT OF COMMERCE</b> United States Patent and Trademark Office Address COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

**\*BIBDATASHEET\*****CONFIRMATION NO. 8251**

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/682,258	<b>FILING DATE</b> 10/08/2003  <b>RULE</b>	<b>CLASS</b> 254	<b>GROUP ART UNIT</b> 3723	<b>ATTORNEY DOCKET NO.</b> 9793-004						
<b>APPLICANTS</b> Patrick J. Whelan, Troutdale, OR;  <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/417,108 10/08/2002  <b>** FOREIGN APPLICATIONS *****</b>  <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 01/05/2004</b>										
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met/after Verified and Acknowledged Allowance	STATE OR COUNTRY OR  SHEETS DRAWING 3  TOTAL CLAIMS 21  INDEPENDENT CLAIMS 3	Examiner's Signature _____ Initials _____								
<b>ADDRESS</b> MARGER JOHNSON & McCOLLOM, P.C. 1030 S.W. Morrison Street Portland , OR 97205										
<b>TITLE</b> Prying tool with positionable handle										
<b>FILING FEE RECEIVED</b> 394	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:									
<table border="1"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>					<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> All Fees										
<input type="checkbox"/> 1.16 Fees ( Filing )										
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )										
<input type="checkbox"/> 1.18 Fees ( Issue )										
<input type="checkbox"/> Other _____										
<input type="checkbox"/> Credit										